(Space Above Reserved for Recorder of Deeds Certification)

MO	SOURI DEPARTMENT TOR VEHICLE BUREA FIDAVIT OF AFFIX	AU		D.	age 1 of 3	FORM <b>5312</b> (REV. 3-2011)
Grantor/Grant				re	Date	(NLV. 3-2011)
Name of Manu	ufactured Homeowner					
Street Address	s Where the Manufactured	d Home is or will be Located	City		State	Zip
MANUFA	CTURED HOME	INFORMATION				
Manufacturer		Manufacturer's Serial Numb	er of the M	anufactured Home	Hon	ne is:
						New Used
Model Year	Make	Model Name		Dimensions of the Home		
DEAL E	I STATE INFORMA	TION				

I HEREBY STATE THE FOLLOWING: (PL	ACE INITIALS IN APPLICABLE BOXES)
I am the owner of the real estate descr	ribed in this affidavit; or,
continues for at least 20 years after th	nder the terms of a lease in recordable form that has a term that e date of execution of this affidavit. IF YOU HAVE INITIALED MPLETE THE CONSENT OF LESSOR SECTION BELOW.
been permanently affixed and the owner of the r	state where the manufactured home described in this affidavit has manufactured home has entered into a lease for such real estate he date of the execution of this affidavit, I hereby consent to the estate.
	State of Missouri )
Lessor Signature	County of)
Printed or Typed Name of Lessor	Subscribed and sworn before me this
(Seal)	, 20
	Notary Signature
	Printed or Typed Name of Notary
	My Commission Expires
SURRENDERED OWNERSHIP DOCU	MENT INFORMATION
Place your initials in the box that applies to the t do not possess an ownership document, indica	ype of ownership document currently in your possession. If you te so in the appropriate area provided below:
IF YOU POSSESS A MANUFACTURER'S CEF OF ORIGIN	RTIFICATE OF ORIGIN OR MANUFACTURER'S STATEMENT
The manufactured home is currently co	overed by a Manufacturer's Certificate of Origin or Manufacturer's am surrendering the original MCO/MSO. Provide the following
Manufacturer's Serial Number	
MCO/MSO Issue Date	
The original MCO/MSO must be surrender for Surrender of Title or Manufacturer's Common	red to the Director of Revenue with Form 5315, Application ertificate of Origin (MCO).
IF YOU POSSESS A CERTIFICATE OF TITLE	
	covered by a certificate of title. I am surrendering the title to the Provide the following from the title document:
Title Number	
Title Issue Date	
The original title must be surrendered to Surrender of Title or Manufacturer's Certi	the Director of Revenue with Form 5315, Application for ficate of Origin (MCO).
IF YOU ARE UNABLE TO LOCATE EITHER	THE MCO/MSO OR CERTIFICATE OF TITLE
	or I am unable to locate the original MCO/MSO or certificate of documents. I will apply for a confirmation of conversion to the

Name of Designated Agent		WILL RECEIVE WRITTEN ACKNOWLEDGEMENT OF COMPLIANCE)  Business/Agency Name				
Street Address		City		State	Zip	
SECURITY INTEREST/LIE	NHOLDER INFORM	ATION				
Provide the security interest/lie			two use an	addition	al sheet):	
				0::15		
Lienholder Name	Address			Original P	rincipal Amount	
Lienholder Name	Address	dress		Original Principal Amount		
Place your initials in the box	(es) that applies:					
	e described in this affidat ill be released upon satis lienholder.					
	n identified above has the head to the copy of the re					
Under penalties of perjury, I hereb						
Under penalties of perjury, I hereby affixed to the real estate described land, the home was built in compact, and the home is or shall be a my knowledge that the information	d herein, the home has the liance with the federal Massessed and taxed as an contained in this affidavi	e characteristics of anufactured Home ( improvement to the t is true and accurat	site-built hou Construction land. I furth	using and and Safe	is part of the ty Standards	
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